

# MISSOURI DEPARTMENT OF HEALTH STATE PUBLIC HEALTH LABORATORY DATAMASTER MAINTENANCE REPORT

RECEIVED DHSS Breath Alcohol Program
By Carol Day at 8:43 am, Sep 14, 2009

Complete this report in duplicate at the time of the regular monthly preventive maintenance check, and whenever instrument is repaired. Send copy to Department of Health; retain original in department file. DATAMASTER SN DATE OF INSPECTION 204186 09-02-09 LOCATION OF INSTRUMENT (STREET AND CITY) TIME OF INSPECTION Webster County Sheriff's Department, Marshfield, Missouri 1904 CHECKLIST: Place a check (✓) to the left of each item if found to be satisfactory or if operating within established limits. (Write in observed values where determined.) Unchecked items must be corrected before using instrument. DIAGNOSTIC CHECK (PRINTOUT ATTACHED) O COMPUTER ☑ DETECTOR PROGRAM ☑ FILTERS M HEATERS SAMPLE CHAMBER °C ☑ QUARTZ STANDARD FLOW DETECTOR ☑ CALIBRATION PUMP HIGH SPEED PRINTER ☑ INDICATOR LIGHTS TIME AND DATE ☑ SIMULATOR TEMPERATURE (34 °C ± 0.2°C) Z CALIBRATION CHECK -Run three tests using a standard solution. All three tests must be within  $\pm$  5% of the standard value and must have a spread of .005 or less. Check the box corresponding to the standard solution being used. (PRINTOUT ATTACHED) (USE RECIRCULATION PUMP) ☑ 0.100% STANDARD - MUST READ BETWEEN 0.095% and 0.105% INCLUSIVE ☐ 0.040% STANDARD - MUST READ BETWEEN 0.038% and 0.042% INCLUSIVE (ONLY ONE STANDARD IS TO BE USED PER MAINTENANCE REPORT) TEST 1 📂 .095 TEST 2 .096TEST 3 .096PERFORM R.F.I. TEST (PRINTOUT ATTACHED) M NUMBER OF REFUSALS, SINCE LAST MAINTENANCE REPORT, AND NUMBER OF BREATH TESTS IN EACH RANGE AS FOLLOWS: (DO NOT INCLUDE SIMULATOR TESTS) REFUSALS 1 (0-.04)(.05-.09)(.10 - .14)(.15 - .19)(Over .19) List any new parts and describe any alteration or modification that was made to restore the instrument to operate satisfactorily and within established limits (use other side if necessary) This instrument is operating within the guidelines set forth by Department of Health Instrument inventory # 127306 Guth Laboratories Solution Lot No. 08340 Expiration date 10/15/09 Simulator Temp. 33.9 Degrees INSPECTING OFFICER SIGNATURE PRINT NAME T.A. Badgett TYPE II PERMIT NUMBER EXPIRATION DATE TELEPHONE NUMBER 820239 08/07/10 (417) 895-6868



#### CERTIFICATE OF ANALYSIS

Certified Alcohol Reference Solution for Simulator

Random Samples of Lot Number 08340 of Alcohol Reference Solution for Simulator were analyzed by gas chromatography and found to contain 0.1211 percent (w/vol) ethyl alcohol. The expiration date for this lot number is October 15, 2009 at 11:59 PM.

When used in a calibrated Simulator, operating at 34°C +/- .2°C, this solution will give a breath alcohol analysis instrument reading of 0.10 percent BAC.

The alcohol and wat used in this solution were free of test interfering substances.

fed L. Pauley, President GUTH LABORATORIES, INC.

### BAC DataMaster Evidence Ticket

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Face This Side Down - This Edge In First

# **BAC DataMaster**Evidence Ticket

MISSOURT STATE MICHARY GATON. BAC MATAMASTER SERIAL MUNISER 204196 09/02/09

TESTING OFFICER:
BROGETTUTUR
OFFICER I.D.: 236
PERMIT MUMBER: 829239
EXPIRATION DATE: 98/87/10
MISCELLANEOUS DATE:

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TRANSPORT STANDART	୍ର୍ବର	19195
RLANK TEST	ବହୁଦ	19196
EXTECNOL STANDARD	~우리	(७१७७
PLANK TEST	धालान	19:07

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Operator Signature

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Evidence Ticket

Face This Side Down - This Edge In First

BAC DataMaster

## State of Missouri DEPARTMENT OF HEALTH



### PERMIT TYPE II



### TRENTON BADGETT

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ca	librate, <sub>l</sub>	perform field	i re	pairs, and	d ope	rate the fol	lowing brea	ith an	alvzer(s):	mopect,

### DATAMASTER

for the determination of the alcoholic content of blood from a sample of expired (alveolar) air. Issued under the provisions of sections 577.020 through 577.041, RSMo 1986.

Date	08/07/08	Tui C. Ooland			
	820239	Director of State Public Health Laboratory			
Number 08/07/2010					
Expires					
MO 580-07	71 (7-88)	- Director, Department of Health			